K	S	INSURANCE IDENTIFICATION CAR
(ST	ATE)	
COMPANY NUMBER	COMPANY	X COMMERCIAL PERSONAL
	Berkshire Hatha	away Homestate Companies
POLICY NUMBER	EFFECTIVE DAT	E EXPIRATION DATE
02 APM 007372-	8/1/2016	8/1/2017
YEAR Fleet	MAKE/MODEL	VEHICLE IDENTIFICATION NUMBER
rieet		
AGENCY/COMPANY ISS	UING CARD	
AGENCY/COMPANY ISS	son Insurance renue, Suite 205	P.O. Box 1989 989 (785)537-1600
AGENCY/COMPANY ISS Charlson-Wils 555 Poyntz Av Manhattan	son Insurance renue, Suite 205	
AGENCY/COMPANY ISS Charlson-Wils 555 Poyntz Av Manhattan INSURED	son Insurance renue, Suite 205	
AGENCY/COMPANY ISS Charlson-Wils 555 Poyntz Av Manhattan INSURED Kansas	son Insurance renue, Suite 205 KS 66505-1	
AGENCY/COMPANY ISS Charlson-Wils 555 Poyntz Av Manhattan INSURED Kansas Departm	son Insurance renue, Suite 205 KS 66505-1 State Fleet	

Web Address: http://www.charlsonwilson.com

THIS CARD MUST BE KEPT IN THE INSURED VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

- 1. Name and address of each driver, passenger and witness.
- $2. \ Name \ of \ Insurance \ Company \ and \ policy \ number \ for \ each \ vehicle \ involved.$

ACORD 50 (2007/02)

 $@\:ACORD\:CORPORATION\:1983-2007.\:\:All\:rights\:reserved.$

INS050 (200702)

Coverage

The following vehicles carry automobile liability coverage:

- All state-owned vehicles used during the course of conducting official state business
- All leases vehicles used during the course of conducting official state business by state employees
- All personal vehicles used during the course of conducting official state business by state employees

The Insurance Identification Card above should be carried on all vehicles as proof of insurance.

It lists the agency and provider.

All accidents are to be reported to Berkshire Hathaway Homestate Companies

Paula Opal, Claims Specialist II 800-356-5750, ext. 3497 or 402-916-3497 Direct

Email: pjopal@nationalindemnity.com

After hours / 24 hour claim reporting is 800-356-5750

For your convenience the contract page has an Automobile Loss Notice (ACORD Form). It is helpful to also carry this form on all vehicles and provide when reporting a claim.

Additional Questions may be answered by the agency at:

Charlson Wilson Insurance Agency 555 Poyntz Ave., Suite 205 PO Box 1989 Manhattan, KS 66505-1989

Att: Brooke Steiner

bsteiner@charlsonwilson.com

785-537-1600 Fax: 785-537-1657